

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) United We Can		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mack-Sumner Communications LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016		
Mailing Address 2001 N. Beauregard St. Suite 420			Amount 5101.73		
City Alexandria	State VA	Zip Code 22311	Transaction ID : D368910		
Purpose of Expenditure Direct Mail		Category/ Type 006	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016		
Name of Federal Candidate TRUMP, DONALD J, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Mack-Sumner Communications LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016		
Mailing Address 2001 N. Beauregard St. Suite 420			Amount 5101.73		
City Alexandria	State VA	Zip Code 22311	Transaction ID : D368911		
Purpose of Expenditure Direct Mail		Category/ Type 006	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2016		
Name of Federal Candidate AYOTTE, KELLY A, ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10203.46
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 28 / 2016

Signature